Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | e the name that is on | Ricardo | |
| | pictu | r government-issued ure identification (for mple, your driver's | First name | First name |
| | licer | nse or passport). | Middle name | Middle name |
| | | g your picture | Camargo | |
| | | tification to your sting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | Ricardo Camargo Hernandez | |
| 3. | you num Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-0060 | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 2 of 48

Case number (if known)

Debtor 1 Ricardo Camargo

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| 5. | Where you live | 454 Franklin St. #2 | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Will County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: | Check one: |
| | ванкі црісу | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Entered 07/08/16 16:16:50 Page 3 of 48 Case 16-22077 Doc 1 Filed 07/08/16 Desc Main

Document Case number (if known) Debtor 1 Ricardo Camargo

| Par | Tell the Court About | Your Ba | ankruptcy Ca | ise | | | |
|-----|---|---------|-----------------|-----------------------------------|---|--|---|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box. | |
| | choosing to file under | ■ Ch | napter 7 | | | | |
| | | □ Ch | napter 11 | | | | |
| | | ☐ Ch | napter 12 | | | | |
| | | ☐ Ch | napter 13 | | | | |
| | | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typ attorney is sub | pically, if you are paying the fee yo | with the clerk's office in your local court for more detail urself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check wit | y |
| | | | | | tallments. If you choose this options (Official Form 103A). | n, sign and attach the Application for Individuals to Pay | |
| | | | | | | only if you are filing for Chapter 7. By law, a judge may | |
| | | | applies to you | ur family size ar | nd you are unable to pay the fee in | ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou | |
| | | | the Application | on to Have the (| Chapter 7 Filing Fee Waived (Offic | ial Form 103B) and file it with your petition. | |
| | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | ı. | | | | |
| | last 8 years? | ☐ Ye | S. | | | | |
| | | | District | | When | Case number | _ |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy | ■ No | | | | | |
| | cases pending or being filed by a spouse who is | _ | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No | Go to li | ine 12. | | | |
| | residence: | ☐ Ye | s. Has yo | ur landlord obta | ained an eviction judgment against | you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out Inbankruptcy pe | | Judgment Against You (Form 101A) and file it with this | |
| | | | | | | | |

Document Page 4 of 48 Case number (if known) Debtor 1 Ricardo Camargo Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 5 of 48

Debtor 1 Ricardo Camargo

o Camargo Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 6 of 48 Case number (if known) Debtor 1 Ricardo Camargo Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999

| estimate | your assets to |
|----------|----------------|
| be worth | ? |
| | |

estimate your liabilities

How much do you

| □ \$500,001 | - \$1 | million |
|-------------|-------|---------|
| _ | | |

\$0 - \$50.000

| ⊔ \$0 - | | |
|---------|---------|-----------|
| \$50 |),001 - | \$100,000 |

□ \$50,001 - \$100,000

\$100,001 - \$500,000

| ш | \$100,001 | - | \$5 | 00,000 |
|---|-----------|---|-----|---------|
| | \$500,001 | - | \$1 | million |

□ \$100,000,001 - \$500 million

| □ \$1,000,001 - \$10 million |
|--------------------------------|
| □ \$10,000,001 - \$50 million |
| □ \$50,000,001 - \$100 million |

□ \$100,000,001 - \$500 million

□ \$1,000,001 - \$10 million

□ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

| | \$500,000,001 - \$1 billion |
|---|--------------------------------|
| | \$1,000,000,001 - \$10 billion |
| П | \$10,000,000,001 - \$50 billio |

| | \$10,000,000,001 - \$50 billion |
|--------|---------------------------------|
| \Box | Mara than CEO billian |

☐ More than \$50 billion

□ \$500,000,001 - \$1 billion

☐ More than \$50 billion

□ \$1,000,000,001 - \$10 billion

□ \$10,000,000,001 - \$50 billion

Part 7: Sign Below

20. How much do you

to be?

For you

19.

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ | Ricar | do | Cama | ırgo |
|-----|-------|----|------|------|
| Dia | | ~ | | |

Ricardo Camargo Signature of Debtor 1 Signature of Debtor 2

MM / DD / YYYY

Executed on July 8, 2016

MM / DD / YYYY

Executed on

Debtor 1 Ricardo Camargo Document Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Robert J Hamilton | Date | July 8, 2016 |
|--|---------------|----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| 5 1 | | |
| Robert J Hamilton | | |
| Printed name | | |
| Hamilton & Antonsen, Ltd. | | |
| Firm name | | |
| 3290 Executive Drive, Suite 101 | | |
| Joliet, IL 60431 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (815)729-9220 | Email address | rob@halawoffices.com |
| 6299951 | | |
| Bar number & State | | |

| | | Documen | t Page 8 of 48 | |
|---------------------|--------------------------|---------------------|----------------|--------------------------------------|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Ricardo Camargo | 0 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT O | FILLINOIS | |
| Case number | | | | To Obert With the trees |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | t 1: Summarize Your Assets | | |
|-----|--|--------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 20,080.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 20,080.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities : you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 20,297.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 33,103.00 |
| | Your total liabilities | \$ | 53,400.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,640.12 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,481.33 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | edules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Vous debte are primarily concurred debte. Concurred debte are those "neuroid by an individual primarily for | | Carra Division |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Desc Main Entered 07/08/16 16:16:50 Case 16-22077 Doc 1 Filed 07/08/16 Document

Page 9 of 48 Case number (if known) Debtor 1 Ricardo Camargo

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

2,727.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Fill in | this inf | ormation to identify y | our case and | d this filing: | Hell Paue 10 01 46 | | | |
|----------------|-----------------|---|------------------|------------------|--|-------------------------|----------------------|--|
| Debto | or 1 | Ricardo Cam | | | | | | |
| Debto | or 2 | First Name | М | iddle Name | Last Name | | | |
| | e, if filing) | First Name | M | iddle Name | Last Name | | | |
| United | d States | Bankruptcy Court for t | he: NORTH | ERN DISTRIC | CT OF ILLINOIS | | | |
| Case | number | | | | | | | Check if this is an |
| | | | | | | | | amended filing |
| Offi | cial F | orm 106A/B | | | | | | |
| Scl | hedu | ıle A/B: Pr | operty | | | | | 12/15 |
| think it | fits best | . Be as complete and ac nore space is needed, at | ccurate as pos | sible. If two ma | ly once. If an asset fits in more than arried people are filing together, both form. On the top of any additional pa | are equally responsible | for supply | ying correct |
| Part 1 | Descri | be Each Residence, Bu | ilding, Land, or | Other Real Es | tate You Own or Have an Interest In | | | |
| 1. Do y | you own o | or have any legal or equ | itable interest | in any residend | ce, building, land, or similar property | ? | | |
| ■ N | No. Go to I | Part 2. | | | | | | |
| □ Y | es. Whe | re is the property? | | | | | | |
| Part 2 | Descri | be Your Vehicles | | | | | | |
| _ | _ | | | | | | | |
| | | | | | vehicles, whether they are regis redule G: Executory Contracts and | | any vehic | les you own that |
| 3 Cai | rs vans | trucks, tractors, spo | ort utility vehi | cles motorc | vrles | | | |
| | | , truoko, truotoro, ope | readility voil | oles, motore | yoloo | | | |
| | | | | | | | | |
| I | res | | | | | | | |
| 3.1 | Make: | Toyota | | Who has an i | nterest in the property? Check one | | | s or exemptions. Put |
| | Model: | Rav 4 | | Debtor 1 or | | | | aims on <i>Schedule D:</i> Secured by Property. |
| | Year: | 2013 | | Debtor 2 or | nly | Current value of | the C | urrent value of the |
| | | nate mileage:formation: | 24000 | | nd Debtor 2 only | entire property? | р | ortion you own? |
| | Otherin | iorniauori. | | ☐ At least one | e of the debtors and another | | | |
| | | | | | nis is community property | \$19,110 | .00 | \$19,110.00 |
| | | | | (see instruct | ions) | | | |
| | <i>mples:</i> B | | | | tional vehicles, other vehicles, a vessels, snowmobiles, motorcycle | | | |
| | | | | | r entries from Part 2, including a | | | \$19,110.00 |
| Part 3 | Descri | be Your Personal and I | lousehold Item | ns | | | | |
| | | | | | f the following items? | | por t Do t | rent value of the tion you own? |
| 6 Ho | usehold | goods and furnishin | as | | | | ciali | ns or exemptions. |

6.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

| | Case 16-22077 | Doc 1 | Filed 07/08/16 | Entered 07/08/16 16:16:50 | Desc Main |
|-------------------------|--|-----------------|----------------------------|--|---|
| Debtor 1 | Ricardo Camargo | | Document | Page 11 of 48 Case number (if known | m) |
| ■ Yes. | Describe | | | | |
| | | oom furnit | | | |
| | dining tv 200 | room furni | iture 25 | | \$250.00 |
| | | | | - | |
| 7. Electron Example No | | | | pment; computers, printers, scanners; musi | c collections; electronic devices |
| ☐ Yes. | Describe | | | | |
| Example ■ No | bles of value les: Antiques and figurines; other collections, memo | | | oks, pictures, or other art objects; stamp, co | oin, or baseball card collections; |
| | ent for sports and hobbie les: Sports, photographic, e musical instruments | | other hobby equipment; | bicycles, pool tables, golf clubs, skis; canoe | es and kayaks; carpentry tools; |
| ☐ Yes. | Describe | | | | |
| 10. Firearr | ns ples: Pistols, rifles, shotgun | s, ammunitio | n, and related equipmer | t | |
| ■ No | Describe | | | | |
| □ No | bs ples: Everyday clothes, furs | s, leather coat | ts, designer wear, shoes | s, accessories | |
| | clothin | a | | | \$100.00 |
| | | 9 | | | |
| ■ No | | tume jewelry, | , engagement rings, wed | lding rings, heirloom jewelry, watches, gem | s, gold, silver |
| Exam | nrm animals ples: Dogs, cats, birds, hors | ses | | | |
| ■ No □ Yes. | Describe | | | | |
| ■ No | ther personal and househ Give specific information | | ou did not already list, i | ncluding any health aids you did not list | |
| | the dollar value of all of yo art 3. Write that number h | | | ny entries for pages you have attached | \$350.00 |
| | scribe Your Financial Assets | | | | |
| Do you ov | vn or have any legal or eq | quitable inter | rest in any of the follov | ving? | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Official Form 106A/B Schedule A/B: Property page 2

| Debto | or 1 | Case 16-220 | | Filed 07/08/16 Document | Entered 07/08/16 16:16:50 Page 12 of 48 Case number (if known) | Desc Main |
|---------|-------------------------|---|--|------------------------------|--|-------------------------------|
| | | Ricardo Camar | go | | Case number (ii known) | |
| | Examp No | | | your home, in a safe dep | osit box, and on hand when you file your petiti | on |
| | | | | | Cash | \$20.00 |
| E | | | | ial accounts; certificates | of deposit; shares in credit unions, brokerage l stitution, list each. | nouses, and other similar |
| _ | | | | Institution | name: | |
| | | 1 | 17.1. checking | PNC Ban | k | \$200.00 |
| | | mutual funds, or p | | | | |
| | Examp No | eles: Bond funds, inve | estment accounts v | with brokerage firms, mo | ney market accounts | |
| | Yes | | Institution or | issuer name: | | |
| jo | oint ve | blicly traded stock enture | and interests in i | ncorporated and uninc | orporated businesses, including an interes | t in an LLC, partnership, and |
| | No | 0 | | | | |
| Ц | Yes. | Give specific inform | ation about them Name of entity: | | % of ownership: | |
| ^ ^ | Negotia Non-ne No | able instruments incl | ude personal chec s are those you car | | egotiable instruments omissory notes, and money orders. by signing or delivering them. | |
| | | | Issuer name: | | | |
| _E | | nent or pension aco les: Interests in IRA, | | 01(k), 403(b), thrift saving | gs accounts, or other pension or profit-sharing | plans |
| | | List each account se | parately. Type of account: | Institution | name: | |
| Y _E | our sh | | eposits you have m | | ntinue service or use from a company ctric, gas, water), telecommunications compar | nies, or others |
| | | | | Institution | name or individual: | |
| | | F | Rental deposit | Security | Deposit | \$400.00 |
| | | | | | | |
| | No | | periodic payment o | of money to you, either fo | r life or for a number of years) | |
| | Yes | Issuer | r name and descrip | otion. | | |
| 26 | U.S.C | s in an education II C. §§ 530(b)(1), 529/ | | | ogram, or under a qualified state tuition pro | ogram. |
| | No Yes | Institu | ition name and des | scription. Separately file t | he records of any interests.11 U.S.C. § 521(c) | |
| _ | | equitable or future | interests in prop | erty (other than anythii | ng listed in line 1), and rights or powers exe | ercisable for your benefit |
| | No Yes. | Give specific inform | ation about them | | | |

| | | Case 16-22077 | Doc 1 | | | Desc Main |
|-----|------------------|--|---------------------------------|---------------------------|--|--|
| D | ebtor 1 | Ricardo Camargo | | Document | Page 13 of 48 Case number (if known) | |
| 26 | Examp ■ No | s, copyrights, trademarks les: Internet domain names Give specific information a | s, websites, pr | | | |
| 27. | License Examp | es, franchises, and other | general intar sive licenses, | | holdings, liquor licenses, professional license | əs |
| M | | property owed to you? | bout trieffi | | | Current value of the |
| 141 | oney or p | noperty owed to you! | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | | unds owed to you | | | | |
| | ■ No □ Yes. | Give specific information ab | oout them, inc | luding whether you alrea | ady filed the returns and the tax years | |
| 29 | ■ No | | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| 30. | Examp ■ No | mounts someone owes y les: Unpaid wages, disabili- benefits; unpaid loans Give specific information | ty insurance p | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| 31. | | ts in insurance policies les: Health, disability, or life | insurance; h | ealth savings account (F | HSA); credit, homeowner's, or renter's insurar | nce |
| | _ | Name the insurance compa Com | ny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a | erest in property that is dure the beneficiary of a living the has died. | | | d surance policy, or are currently entitled to rece | vive property because |
| | ☐ Yes. | Give specific information | | | | |
| 33. | Examp ■ No | against third parties, who les: Accidents, employmen | | | t or made a demand for payment to sue | |
| 3/ | | | ad claims of | every nature including | g counterclaims of the debtor and rights to | set off claims |
| J4. | ■ No | Describe each claim | ou ciaims of | every nature, mendanig | geodinercialities of the debior and rights to | Set on claims |
| 35. | | ancial assets you did not | already list | | | |
| | ■ No □ Yes. | Give specific information | | | | |
| 36 | | | | | y entries for pages you have attached | \$620.00 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

| Debt | or 1 | Case 16-22077 Ricardo Camargo | Doc 1 | Filed 07/08 Documer | | Entered 0 ^o Page 14 of | 7/08/16 16:16:50 48 Case number (if known) | Desc Main | |
|--------------|-------------|---|-------------------|------------------------|---------|--------------------------------------|--|-----------|-----------|
| | | | | | | | Caco Hamber (# Michin) | - | |
| | - | own or have any legal or equi | itable interest i | n any business-re | lated p | roperty? | | | |
| _ | | | | | | | | | |
| ш | Yes. G | Go to line 38. | | | | | | | |
| | | | | | | | | | |
| Part 6 | | scribe Any Farm- and Comme ou own or have an interest in fa | | | ou Ow | n or Have an Interes | st In. | | |
| 46. D | o you | ı own or have any legal or | r equitable in | terest in any far | m- or o | commercial fishin | g-related property? | | |
| ı | No. | Go to Part 7. | | | | | | | |
| [| ☐ Yes. | . Go to line 47. | | | | | | | |
| | | | | | | | | | |
| Part 7 | 7: | Describe All Property You | Own or Have a | n Interest in That | You Dic | Not List Above | | | |
| | Examp No | n have other property of an oles: Season tickets, country Give specific information | y club membe | | ist? | | | | |
| 54. | Add t | he dollar value of all of yo | our entries fr | om Part 7. Write | that n | umber here | | | \$0.00 |
| | | | | | | | | | |
| Part 8 | 8: | List the Totals of Each Part | of this Form | | | | | | |
| 55. | Part 1 | l: Total real estate, line 2 | | | | | | | \$0.00 |
| 56. | Part 2 | 2: Total vehicles, line 5 | | | | \$19,110.00 | | | |
| 57. | Part 3 | 3: Total personal and hous | sehold items | , line 15 | · | \$350.00 | | | |
| 58. | Part 4 | l: Total financial assets, li | ine 36 | | | \$620.00 | | | |
| 59. | Part 5 | 5: Total business-related រុ | property, line | 45 | | \$0.00 | | | |
| 60. | Part 6 | 6: Total farm- and fishing- | related prope | erty, line 52 | | \$0.00 | | | |
| 61. | Part 7 | 7: Total other property not | t listed, line 5 | 54 | + | \$0.00 | | | |
| 62. | Total | personal property. Add lin | nes 56 througl | า 61 | _ | \$20,080.00 | Copy personal property t | otal \$2 | 20,080.00 |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$20,080.00

| | | I A A A HI III. | 111111111111111111111111111111111111111 | |
|---|--------------------------|-------------------|---|---------------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Ricardo Camargo |) | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this i amended filin |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| I(b) |
|------|
| I(b) |
| |
| |
| I(a) |
| |
| l(b) |
| |
| l(b) |
| |
| I(b) |
| |
| |

Case 16-22077 Filed 07/08/16 Desc Main Entered 07/08/16 16:16:50 Document Page 16 of 48 Debtor 1 Ricardo Camargo Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Doc 1

Yes

| Debtor 1 Ricardo Cam First Name Debtor 2 (Spouse if, filing) United States Bankruptcy Court for t | Middle Name Middle Name | Last Name | | | |
|--|---|-----------------|---|--|-----------------------------------|
| First Name Debtor 2 (Spouse if, filing) First Name | Middle Name Middle Name | | | | |
| (Spouse if, filing) First Name | | Last Name | | | |
| United States Bankruptcy Court for t | he: NORTHERN DISTRICT OF ILL | | | | |
| | no. Horringrandonalor or ill | INOIS | | | |
| Case number(if known) | | | | _ | if this is an |
| Official Form 106D Schedule D: Credito | rs Who Have Claims (| Secured | d by Property | / | 12/15 |
| Be as complete and accurate as possib | le. If two married people are filing togethe it out, number the entries, and attach it t | er, both are eq | ually responsible for sup | oplying correct informa | |
| . Do any creditors have claims secured | d by your property? | | | | |
| \square No. Check this box and subm | it this form to the court with your other | schedules. Yo | ou have nothing else to | report on this form. | |
| Yes. Fill in all of the information | on below. | | | | |
| Part 1: List All Secured Claims | | | | | |
| 2. List all secured claims. If a creditor h for each claim. If more than one creditor | as more than one secured claim, list the crec has a particular claim, list the other creditors petical order according to the creditor's name | s in Part 2. As | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Toyota Motor Credit Co | Describe the property that secures t | he claim: | \$20,297.00 | \$19,110.00 | \$1,187.00 |
| Creditor's Name | 2013 Toyota Rav 4 24000 mil | les | <u> </u> | <u> </u> | |
| Toyota Financial | | | | | |
| Services Po Box 8026 | As of the date you file, the claim is: (apply. | Check all that | | | |
| Cedar Rapids, IA 52408 Number, Street, City, State & Zip Code | _ ☐ Contingent☐ Unliquidated | | | | |
| Number, Street, Oily, State & Zip Sode | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | An agreement you made (such as n | mortgage or sec | eured | | |
| Debtor 2 only | car loan) | | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, med | chanic's lien) | | | |
| At least one of the debtors and another | | _ | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | purchase n | noney security | | |
| Opened 11/13 Las Active Date debt was incurred 6/24/16 | t Last 4 digits of account numb | oer 0001 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$20,297.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$20,297.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 0430 10 22011 B | Document | Page 18 | 3 of 48 | 5.00 Dec | o mani |
|----------------------------------|--|--|----------------|------------------------------------|---------------------|--------------------------|
| Fill in | this information to identify your c | | | | | |
| Debtor | 1 Ricardo Camargo | | | | 7 | |
| 200.0. | First Name | Middle Name | Last Name | | | |
| Debtor | | | | | | |
| (Spouse | if, filing) First Name | Middle Name | Last Name | | | |
| United | States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | | |
| Case n | number | | | | | |
| (if known |) | | | | □ C | heck if this is an |
| | | | | | ar | mended filing |
| Offici | al Form 106E/F | | | | | |
| | edule E/F: Creditors Wi | no Have Unsecured (| Claims | | | 12/15 |
| | omplete and accurate as possible. Use | | | Part 2 for araditors with NO | NIDDIODITY eleit | |
| Schedul left. Atta name an | e G: Executory Contracts and Unexpir e D: Creditors Who Have Claims Secu ich the Continuation Page to this page ind tase number (if known). | red by Property. If more space is no . If you have no information to repo | eded, copy t | he Part you need, fill it out | t, number the ent | ries in the boxes on the |
| Part 1: | | | | | | |
| _ | any creditors have priority unsecured | claims against you? | | | | |
| | No. Go to Part 2. | | | | | |
| | Yes. | | | | | |
| Part 2: | List All of Your NONPRIORITY | Unsecured Claims | | | | |
| 3. Do | any creditors have nonpriority unsecu | red claims against you? | | | | |
| | No. You have nothing to report in this pa | rt. Submit this form to the court with ye | our other sche | edules. | | |
| | Yes. | | | | | |
| uns | t all of your nonpriority unsecured clai secured claim, list the creditor separately n one creditor holds a particular claim, lis t 2. | for each claim. For each claim listed, | dentify what t | ype of claim it is. Do not list of | claims already incl | uded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Afni | Last 4 digits of acco | unt number | 4042 | | \$70.00 |
| | Nonpriority Creditor's Name 1310 Martin Luther King Dr | When was the debt i | 201111042 | Opened 05/16 | | |
| | Bloomington, IL 61701 | When was the dept i | icurreur | Opened 05/16 | | |
| | Number Street City State Zlp Code | As of the date you fil | e, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and anot | her Type of NONPRIORIT | Y unsecured | l claim: | | |
| | ☐ Check if this claim is for a comm | | | | | |
| | debt | | | ration agreement or divorce | that you did not | |
| | Is the claim subject to offset? | report as priority claim | | a plane, and other state. | hta | |
| | ■ No | • | • | g plans, and other similar de | | |
| | ☐ Yes | Other. Specify C | ollection / | Attorney Dish Netwo | rk | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 19 of 48

Debtor 1 Ricardo Camargo Case number (if know) 4.2 \$15,222.00 **Calvary Portfolio Services** Last 4 digits of account number 3230 Nonpriority Creditor's Name 500 Summit Lake Dr When was the debt incurred? **Opened 03/16** Ste 400 Valhalla, NY 10595 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Citibank ☐ Yes 4.3 Kohls/Capital One Last 4 digits of account number 5141 \$3,071.00 Nonpriority Creditor's Name Opened 10/98 Last Active Po Box 3120 When was the debt incurred? 5/08/16 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Charge Account Other, Specify 4.4 Midland Funding Last 4 digits of account number 8126 \$2,987.00 Nonpriority Creditor's Name 2365 Northside Dr When was the debt incurred? **Opened 03/14** Suite 300 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Factoring Company Account Citibank N.A. ☐ Yes

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 20 of 48

Debtor 1 Ricardo Camargo Case number (if know) 4.5 \$1,247.00 Midland Funding Last 4 digits of account number 0883 Nonpriority Creditor's Name 2365 Northside Dr When was the debt incurred? **Opened 05/14** Suite 300 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Factoring Company Account Webbank ☐ Yes 4.6 **Portfolio Recovery** Last 4 digits of account number 6778 \$5,175.00 Nonpriority Creditor's Name Po Box 41067 When was the debt incurred? **Opened 04/15** Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Factoring Company Account U.S. Bank ☐ Yes Other. Specify **National Association** 4.7 Last 4 digits of account number 3893 \$2,671.00 Portfolio Recovery Nonpriority Creditor's Name Po Box 41067 When was the debt incurred? **Opened 08/14** Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** Other. Specify ☐ Yes Bank

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 21 of 48 (ase number (if know))

| 4.8 | Sears | Last 4 digits of account number | \$2,000.00 | | | | | |
|-----|--|--|------------|--|--|--|--|--|
| | Nonpriority Creditor's Name PO Box 183082 Columbus, OH 43218 | When was the debt incurred? | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ☐ Yes | Other. Specify Credit card purchases | | | | | | |
| | Stanislaus Credit Control Service, | 40014 | 4000.00 | | | | | |
| 4.9 | Inc. Nonpriority Creditor's Name | Last 4 digits of account number 46N1 | \$260.00 | | | | | |
| | Po Box 480 | When was the debt incurred? | | | | | | |
| | Modesto, CA 95353 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | The of the date you me, the stant let. Oncook an anatappy | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Yes | ■ Other. Specify Med1 02 Cepamerica | | | | | | |
| 4.1 | Vision Financial Servi | Last 4 digits of account number 3225 | \$100.00 | | | | | |
| 0 | Nonpriority Creditor's Name | Last 4 digits of account number 3225 | \$100.00 | | | | | |
| | 1900 W Severs Rd La Porte, IN 46350 | When was the debt incurred? Opened 03/15 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | one of the debtors and another Type of NONPRIORITY unsecured claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ■ No | | | | | | | |
| | ☐ Yes | Other, Specify Collection Attorney Silver Cross Hospital | | | | | | |

| Debto | or 1 Ricardo Camargo | | Case number (if know) | | | | | |
|-------|--|---|---|----------|--|--|--|--|
| 4.1 | Vision Financial Servi | Last 4 digits of account number | 5443 | \$100.00 | | | | |
| ' | Nonpriority Creditor's Name 1900 W Severs Rd | When was the debt incurred? | Opened 09/14 | · | | | | |
| | La Porte, IN 46350 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Collection | Attorney Silver Cross Hospital | | | | | |
| 4.1 | Vision Financial Servi | Last 4 digits of account number | 5251 | \$100.00 | | | | |
| | Nonpriority Creditor's Name 1900 W Severs Rd La Porte, IN 46350 | When was the debt incurred? | Opened 09/14 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | ☐ Obligations arising out of a sepa | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | |
| | No | ☐ Debts to pension or profit-sharin | = 1 | | | | | |
| | Yes | Other. Specify Collection | Attorney Silver Cross Hospital | | | | | |
| 4.1 | Vision Financial Servi | Last 4 digits of account number | 1948 | \$100.00 | | | | |
| | Nonpriority Creditor's Name 1900 W Severs Rd | When was the debt incurred? | Opened 04/11 | | | | | |
| | La Porte, IN 46350 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | , i.e. o. i.i.e auto , ou i.i.e, i.i.e oiuiiii | C. C. O. C. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | | □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Disputed □ Dis | | | | | | |
| | • | | | | | | | |
| | ☐ Check if this claim is for a community | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | □Yes | Attorney Silver Cross Hospital | | | | | | |
| | | Other. Specify Collection | - · · · · · · · · · · · · · · · · · · · | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 23_of 48

| Debtor 1 Ricardo Camargo | | Case number (if know) |
|--|---------------------------------------|---|
| Kevin W. Mortell | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| 1821 Walden Office Square Suite 400 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Schaumburg, IL 60173 | | |
| | Last 4 digits of account number | 3403 |
| Name and Address | On which entry in Part 1 or Part 2 or | did you list the original creditor? |
| Reader Link Distribution | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| c/o Steven Carlos 1420 Kensington Road Oak Brook, IL 60523 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| , | Last 4 digits of account number | 3403 |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 6f. | Student loans | 6f. | \$ | Total Claim 0.00 |
| Total claims | | | | · | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 33,103.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 33,103.00 |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--------------------------------------|
| Debtor 1 | Ricardo Camargo |) | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Lease
454 Franklin Street
Joliet, IL 60435

State what the contract or lease is for
month to month lease

| | | Docume | nt Page 25 d | NT 48 | |
|---|--|--|--|---|--|
| Fill in this in | formation to identify your | | | | |
| Debtor 1 | Ricardo Camargo |) | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | | NORTHERN DISTRICT | | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | r | | | | Charle if this is an |
| (ii kilowii) | | | | | Check if this is an amended filing |
| | | | | | Ç |
| Official I | Form 106H | | | | |
| Schedu | le H: Your Cod | ebtors | | | 12/15 |
| ■ No □ Yes 2. Withir Arizona, ■ No. G □ Yes. □ 3. In Columin line 2 | California, Idaho, Louisiana, o to line 3. Did your spouse, former spouse, former spouse, list all of your codebt again as a codebtor only i | u lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live cors. Do not include your f that person is a guaran | operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make | ry? (Community property ington, and Wisconsin.) r if your spouse is filing sure you have listed th | y states and territories include g with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| out Colu | ımn 2. | - | • | | |
| | Jumn 1: Your codebtor ne, Number, Street, City, State and Zi | IP Code | | Column 2: The cre Check all schedule | ditor to whom you owe the debt s that apply: |
| | | | | _ | |
| 3.1 | me | | | ☐ Schedule D, line | |
| | | | | ☐ Schedule E/F, li ☐ Schedule G, line | |
| Nu | mber Street | | | — — — — — — — — — — — — — — — — — — — | |
| City | | State | ZIP Code | | |
| | | | | Пол | |
| 3.2 Nai | me | | | Schedule D, line | |
| | | | | ☐ Schedule E/F, li ☐ Schedule G, line | |
| k1 | mhor Circat | | | | · |
| City | mber Street | State | ZIP Code | | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 26 of 48

| Fill | in this information to identify your c | ase: | | | | | | |
|---------------------------|--|--|---|-----------------------|-------------------------|-----------------------------|---|-----------------------------|
| | btor 1 Ricardo Car | | | | | | | |
| _ | btor 2 buse, if filing) | | | | _ | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | |
| (If kr | se number | | | | | 13 income | ed filing ent showing postp as of the following | |
| _ | chedule I: Your Inc | ome | | | | MM / DD/ Y | YYY | 12/15 |
| sup spo atta Par | as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment | are married and not filing wi | ng jointly, and your s th you, do not includ | pouse is le inform | living wit ation abo | h you, inclu ut your spo | ude information a ouse. If more spa | about your ce is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing sp | ouse |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | ☐ Employed | | |
| | information about additional employers. | , ., | ☐ Not employed | | | ☐ Not employed | | |
| | Include part-time, seasonal, or | Occupation | shipping and red | eiving | | | | |
| | self-employed work. | Employer's name | Reader Link Dist | tributor | <u>s</u> | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1420 Kensigntor Oak Brook, IL 60 | | 00 | | | |
| | | How long employed the | here? 11 years | 5 | | | | |
| Pai | rt 2: Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | you have nothing to re | port for a | ny line, wri | ite \$0 in the | space. Include yo | ur non-filing |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | for all er | nployers fo | or that perso | on on the lines bel | ow. If you need |
| | | | | | For De | ebtor 1 | For Debtor 2 on non-filing spo | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | ry, and commissions (becalculate what the month) | efore all payroll y wage would be. | 2. | \$ | 2,860.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | N/A |

2,860.00

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 27 of 48

| Deb | tor 1 | Ricardo Camargo | - | С | ase | number (if known) | | | | |
|-----|----------------------------|---|------|----|-------------------|-------------------|------|--------------------|----------------|------------------|
| | | | | | For | Debtor 1 | | Debtor filing s | 2 or spouse | |
| | Cop | by line 4 here | 4. | | \$ | 2,860.00 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | |
| - | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 328.08 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | $\mathring{\$}^-$ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e | | \$ | 194.13 | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | \$ | 697.67 | \$ | | N/A | _ |
| | 5g. | Union dues | 5g | | \$ | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | _ 5h | .+ | \$ | 0.00 | + \$ | | N/A | <u> </u> |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 1,219.88 | \$ | | N/A | <u>-</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ | 1,640.12 | \$ | | N/A | _ |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | \$_ | 0.00 | \$ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$ | 0.00 | \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | \$ | | N/A | _ |
| | 8e. | Social Security | 8e | | \$ | 0.00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | 0.00 | \$ | | N/A | _ |
| | 8g. | Pension or retirement income | 8g | | \$ | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | _ 8h | .+ | \$_ | 0.00 | + | | N/A | <u> </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$ | | N/A | A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,640.12 + \$ | | N/A | = \$ | 1,640.12 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | *- | | 1,040.12 | | 14// | * - | 1,040.12 |
| 11. | Star Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depe | | , | • | , | chedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The respect that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | 12. | \$ | 1,640.12 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | · | Combi month | ned ly income |
| | | No. | | | | | | | | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 28 of 48

| Fill i | in this information to identify your case: | | | | |
|--------|---|-------------------------|-----------------|-------------------|-------------------------------|
| Debt | otor 1 Ricardo Camargo | | Chec | ck if this is: | |
| | otor 2 | | | | wing postpetition chapter |
| (Spo | ouse, if filing) | | | 13 expenses as of | the following date: |
| Unite | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL | INOIS | | MM / DD / YYYY | |
| | nown) | | | | |
| | fficial Form 106J | | | | |
| | chedule J: Your Expenses | and Cilina to math and | | - 11 | 12/1 |
| info | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th mber (if known). Answer every question. | | | | |
| Part | t 1: Describe Your Household Is this a joint case? | | | | |
| ١. | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expens | ooo for Coporato House | ahold of Dob | tor 2 | |
| | · | ses for Separate Flouse | eriola di Debi | 101 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent | | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| | | | | | □ res |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes | | | | |
| | t 2: Estimate Your Ongoing Monthly Expenses | | | | |
| exp | imate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a su blicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> ficial Form 106I.) | | | Your exp | enses |
| · | · | | | | |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | . Include first mortgag | e 4. \$ | | 400.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| 5. | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as | home equity loans | 4d. \$ 5. \$ | | 0.00 |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 29 of 48

| Debtor ' | Ricardo | Camargo | Case num | ber (if known) | |
|----------------|-----------------|---|--------------|----------------|-----------------------|
| 6. Uti | ilities: | | | | |
| 6. 6 1. | | , heat, natural gas | 6a. | \$ | 0.00 |
| 6b. | • | ewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | · | 163.00 |
| 6d. | • | | 6d. | · - | 0.00 |
| | | sekeeping supplies | 7. | · | 550.00 |
| | | children's education costs | 8. | \$ | 8.33 |
| _ | | dry, and dry cleaning | 9. | \$ | 100.00 |
| | - | products and services | 10. | · — | |
| | | • | | · | 50.00 |
| | | ental expenses | 11. | \$ | 100.00 |
| | | Include gas, maintenance, bus or train fare. car payments. | 12. | \$ | 400.00 |
| | | clubs, recreation, newspapers, magazines, and books | 13. | · | 100.00 |
| | | tributions and religious donations | 14. | • | 0.00 |
| | surance. | tributions and religious donations | 14. | Ψ | 0.00 |
| | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| | a. Life insura | | 15a. | \$ | 0.00 |
| | b. Health ins | | 15b. | · | 0.00 |
| _ | c. Vehicle in | | 15c. | · - | 80.00 |
| | | urance. Specify: | 15d. | | 0.00 |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| _ | ecify: | include taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| | | lease payments: | | | _ |
| | | nents for Vehicle 1 | 17a. | · | 530.00 |
| | | nents for Vehicle 2 | 17b. | \$ | 0.00 |
| 170 | c. Other. Sp | pecify: | 17c. | \$ | 0.00 |
| 170 | d. Other. Sp | pecify: | 17d. | \$ | 0.00 |
| | | s of alimony, maintenance, and support that you did not report as | 10 | Ф | 0.00 |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · | |
| | | s you make to support others who do not live with you. | 40 | \$ | 0.00 |
| | ecify: | | 19. | | |
| | | perty expenses not included in lines 4 or 5 of this form or on School and other property. | | | 0.00 |
| | | s on other property | 20a. | | 0.00 |
| | b. Real esta | | 20b. | · - | 0.00 |
| | | homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | | nce, repair, and upkeep expenses | 20d. | | 0.00 |
| _ | | ner's association or condominium dues | 20e. | \$ | 0.00 |
| i. Otl | her: Specify: | | 21. | +\$ | 0.00 |
| 2. Ca | Iculate your | monthly expenses | | | |
| 228 | a. Add lines 4 | through 21. | | \$ | 2,481.33 |
| 22 | b. Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 220 | c. Add line 22 | 2a and 22b. The result is your monthly expenses. | | \$ | 2,481.33 |
| | | | | | |
| | - | monthly net income. | | • | |
| | | 12 (your combined monthly income) from Schedule I. | 23a. | | 1,640.12 |
| 231 | o. Copy you | ir monthly expenses from line 22c above. | 23b. | -\$ | 2,481.33 |
| 230 | c. Subtract | your monthly expenses from your monthly income. | | | 044.54 |
| | | t is your monthly net income. | 23c. | \$ | -841.21 |
| 4. Do | you expect | an increase or decrease in your expenses within the year after yo | ou file this | form? | |
| For | r example, do y | rou expect to finish paying for your car loan within the year or do you expect you eterms of your mortgage? | | | or decrease because o |
| | | e terms or your mortgage? | | | |
| | No. | | | | |
| | Yes. | Explain here: | | | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 30 of 48

| Fill in this infor | mation to identify your o | ase: | | | |
|---------------------------------|---|--------------------------|----------------------------|-------------------------|---|
| Debtor 1 | Ricardo Camargo | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declarat | tion About a | n Individual | Debtor's Sc | hedules | 12/15 |
| years, or both. 1 | y or property by fraud in 8 U.S.C. §§ 152, 1341, 15 n Below | | ruptcy case can result i | n fines up to \$250,000 | , or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attorr | ney to help you fill out b | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare t e true and correct. | hat I have read the sumr | nary and schedules file | d with this declaratior | n and |
| X /s/ Ric | ardo Camargo | | X | | |
| Ricard | lo Camargo ire of Debtor 1 | | Signature of | Debtor 2 | |

Date _____

Date **July 8, 2016**

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 31 of 48

| E#I | l in this inform | nation to identify you | r 00001 | | | |
|-------------------|----------------------------|---|---|-------------------------------------|--|------------------------------------|
| _ | | nation to identify you | | | | |
| ре | btor 1 | Ricardo Camarg | Middle Name | Last Name | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Ca | se number | | | | | |
| | nown) | | | | _ | Check if this is an mended filing |
| | | | | | | |
| | ficial Fo | | Affaina fan Indiai | duala Filima fan B | | |
| | | | Affairs for Individ | | | 4/16 |
| | | | | | equally responsible for sup additional pages, write you | |
| | | n). Answer every que | | • | , , , | |
| Pa | rt 1: Give D | Details About Your Ma | rital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | ıs? | | | |
| | □ Marriad | | | | | |
| | | | | | | |
| 2. | During the l | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | _ | aor o youro, navo you | mrou uny mioro ouror man | micro you mo nom . | | |
| | ■ No | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | ı | |
| | | , , | · | ŕ | | Datas Daktas 0 |
| | Deptor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | laress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territor ico, Texas, Washington and W | |
| | ■ No | | | | | |
| | _ | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Do | rt 2 Evoloi | n the Sources of Vou | r Incomo | | | |
| Гa | rt 2 Explai | n the Sources of You | rincome | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | Yes. Fil | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and | Sources of income Check all that apply. | Gross income (before deductions |
| - | le | of assument are a second | _ | exclusions) | | and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$16,363.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Case 16-22077 Document

Page 32 of 48 Case number (if known) Debtor 1 Ricardo Camargo

| | | | Debtor 1 | | Debtor 2 | | |
|----|---|--|--|--|---|--|---|
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of ind Check all that a | | Gross income (before deductions and exclusions) |
| | r last calei inuary 1 to | ndar year: December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$37,749.00 | ☐ Wages, combonuses, tips | nmissions, | |
| | | | ☐ Operating a business | | ☐ Operating a | business | |
| | | dar year before that: December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$50,824.00 | ☐ Wages, combonuses, tips | ımissions, | |
| | | | ☐ Operating a business | | ☐ Operating a | business | |
| 5. | Include in and other winnings. List each | come regardless of wh public benefit payment If you are filing a joint of | me during this year or the two ether that income is taxable. Exa is; pensions; rental income; inter case and you have income that y income from each source separar | amples of other income are a test; dividends; money collector you received together, list it | alimony; child supp cted from lawsuits; only once under D | royalties; an ebtor 1. | security, unemployment, and gambling and lottery |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | t Certain Payments Y | ou Made Before You Filed for | Bankruptcy | | | |
| 6. | □ No. | Neither Debtor 1 no individual primarily for individual primarily for During the 90 days by No. Go to line Yes List below paid that not inclue to adjust the Subject to adjust the During the 90 days by No. Go to line Yes List below include paid to individual primarily for the policy include paid to individual primarily for the policy include paid to individual primarily for the policy for the policy individual primarily for the policy for the policy for the policy for the policy for the polic | w each creditor to whom you pai creditor. Do not include paymen de payments to an attorney for the ent on 4/01/19 and every 3 years 2 or both have primarily consulted efore you filed for bankruptcy, di | Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,425* or more atternation of the support oblinis bankruptcy case. In a father that for cases filed or a total d you pay any creditor a total d a total of \$600 or more and the purpose. | al of \$6,425* or moin one or more pay gations, such as claim or after the date of \$600 or more. | ore? yments and the hild support and adjustment ? you paid tha | the total amount you and alimony. Also, do t. |
| | Creditor | 's Name and Address | Dates of payme | nt Total amount paid | Amount you still owe | Was this | payment for |
| | PO Box | Financial Services 5855 tream, IL 60197 | 04/01, 05/01, 0 | 96/01 \$1,590.00 | \$14,000.00 | | |

□ Other

| Debtor 1 | Ricardo Camargo | Document | Cas | se number (if known) | | |
|---------------------|--|---|--|---|----------------------------------|--|
| <i>Inside</i> of wh | in 1 year before you filed for bankrulers include your relatives; any general nich you are an officer, director, person siness you operate as a sole proprietor ony. | partners; relatives of any ge in control, or owner of 20% | neral partners; partners or more of their voting | erships of which yo g securities; and ar | u are a genera ny managing ag | I partner; corporations gent, including one for |
| _ | No Yes. List all payments to an insider. | | | | | |
| _ | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment |
| insid Inclu | in 1 year before you filed for bankruler? de payments on debts guaranteed or c | | yments or transfer a | any property on a | ccount of a de | bt that benefited an |
| | Yes. List all payments to an insider | | | | | |
| | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment tor's name |
| Part 4: | Identify Legal Actions, Repossessi | | | | | |
| - | No Yes. Fill in the details. e title | Nature of the case | Court or agency | | Status of the | e case |
| Mid Car | e number lland funding vs. Ricardo nargo 1\$-3404 | collection | Cook Law Magistrate/Chi 50 West Washi 1001 Chicago, IL 600 | ngton St Rm | ■ Pending □ On appea □ Conclude | |
| Chec | in 1 year before you filed for bankruck all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. | | perty repossessed, f | oreclosed, garnis | hed, attached | , seized, or levied? |
| | ditor Name and Address | Describe the Property | | Date | | Value of the |
| O.C. | and Name and Address | Explain what happene | | Duic | | property |
| acco | in 90 days before you filed for bankrunts or refuse to make a payment be No Yes. Fill in the details. | | cluding a bank or fii | nancial institution | , set off any a | mounts from your |
| _ | ditor Name and Address | Describe the action th | e creditor took | Date | action was | Amount |
| | | | | taken | | |

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

■ No

☐ Yes

Page 34 of 48
Case number (if known) Document Debtor 1 Ricardo Camargo

| Par | t 5: List Certain Gifts and Contributions | 6 | | | |
|-----|---|--------|--|---|---------------------------|
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | ıptcy, | did you give any gifts with a total value of more the | nan \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | 0 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | | did you give any gifts or contributions with a tota | I value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | otal | Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details. | otcy o | r since you filed for bankruptcy, did you lose anyt | hing because of the | ft, fire, other disaster, |
| | | Includ | ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | | |
| 16. | consulted about seeking bankruptcy or p | repar | did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required | | rty to anyone you |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Hamilton & Antonsen, Ltd. 3290 Executive Drive, Suite 101 Joliet, IL 60431 rob@halawoffices.com | | Attorney Fees | 6/13/16 | \$1,500.00 |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that | itors | | or transfer any prope | rty to anyone who |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Case 16-22077 Page 35 of 48
Case number (if known) Document

Debtor 1 **Ricardo Camargo**

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
|-----|---|--|---------------------------------------|---|---|---|---|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | Description and v | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro | | y property to a | self-settle | d trust or similar device | of which you are a | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and v | alue of the pro | perty trans | ferred | Date Transfer was | 3 | | |
| Par | t 8: List of Certain Financial Accounts, In | struments, Safe Deposit | t Boxes, and St | orage Unit | s | | | | |
| 20. | | y, were any financial ac | counts or instr | uments he | ld in your name, or for y | our benefit, closed, | | | |
| | sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number Type of account instrument | | unt or Date account was closed, sold, moved, or transferred | | Last balance before closing o transfe | r | | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed for | bankruptcy, a | ny safe dep | oosit box or other depos | itory for securities, | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Address (Number, Street, City, | | the contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | to it? | to it? Address (Number, Street, City, | | the contents | Do you still have it? | | | |
| Par | t 9: Identify Property You Hold or Control | for Someone Else | | | | | | | |
| 23. | | | ude any proper | ty you borr | rowed from, are storing f | for, or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | | umber, Street, City, State and ZIP | | the property | Value | е | | |
| Par | t 10: Give Details About Environmental Info | | | | | | | | |
| For | the purpose of Part 10, the following definiti | ons apply: | | | | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Page 36 of 48 Case number (if known) Document

Debtor 1 Ricardo Camargo

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | hazardous material, pollutant, contaminant, or similar term. | | | | | | | | | |
|-----|--|---|--|--------------------|---|--------------------|--|--|--|--|
| Rep | Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | | | | |
| 24. | Has | any governmental unit notified you that | you may be liable or potentially liable | und | ler or in violation of an environme | ntal law? | | | | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | i | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | | | |
| 26. | Hav | re you been a party in any judicial or adn | ninistrative proceeding under any envi | ronn | nental law? Include settlements a | nd orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Case Title Case Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | | Status of the case | | | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | | |
| 27. | | _ | | v of | the following connections to any | husiness? | | | | |
| 21. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | | |
| | | ☐ A member of a limited liability comp | | | - | | | | | |
| | | ☐ A partner in a partnership | | | , | | | | | |
| | | ☐ An officer, director, or managing exc | ecutive of a corporation | | | | | | | |
| | | ☐ An owner of at least 5% of the voting | • | | | | | | | |
| | | No. None of the above applies. Go to P | | | | | | | | |
| | _ | Yes. Check all that apply above and fill | | i. | | | | | | |
| | | siness Name dress | Describe the nature of the business | | Employer Identification number Do not include Social Security | | | | | |
| | (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | | Dates business existed | | | | | |
| 28. | | hin 2 years before you filed for bankrupt itutions, creditors, or other parties. | cy, did you give a financial statement t | o an | | de all financial | | | | |
| | | No | | | | | | | | |
| | | Yes. Fill in the details below. | | | | | | | | |
| | Ad | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | | | | | |
| _ | | | | | | | | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Filed 07/08/16 Entered 07/08/16 16:16:50 Case 16-22077 Doc 1 Page 37 of 48 Case number (if known) Document

Debtor 1 Ricardo Camargo

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Rid | cardo Camargo | |
|-----------------|-------------------------|---|
| Ricardo Camargo | | Signature of Debtor 2 |
| Signa | ture of Debtor 1 | |
| Date | July 8, 2016 | Date |
| Did yo ■ No | u attach additional pag | ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| □ Yes | | |
| Did yo | u pay or agree to pay s | someone who is not an attorney to help you fill out bankruptcy forms? |
| No | | |
| ☐ Yes | . Name of Person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 38 of 48

| Fill in this information | on to identify your o | ase: | | | | |
|--|--|-----------------------|----------------|--|-----------------------|--|
| | Ricardo Camargo | | | | | |
| | First Name | Middle Name | | Last Name | | |
| Debtor 2 (Spouse if, filing) F | First Name | Middle Name | | Last Name | | |
| United States Bankru | intev Court for the: | NORTHERN DIST | TRICT OF II | LINOIS | | |
| Officed States Darikit | ipicy Court for the. | NORTHER BIOT | TRIOT OF IL | LINOIO | | |
| Case number | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| | | | | | | |
| Official Form | 108 | | | | | |
| | | n for Indiv | iduale | Filing Und | or Chante | ar 7 |
| Statement | | ii ioi iiiaiv | iduais | i iiiig Olia | ei Chapte | er / 12/15 |
| If you are an individu | ual filing under chap | oter 7, you must fill | l out this for | rm if: | | |
| creditors have cla | aims secured by you | ır property, or | | | | |
| you have leased p | | | | u hankuuntau natitian | | at far the meeting of avaditors |
| | is earlier, unless the | | | | | et for the meeting of creditors, e creditors and lessors you list |
| | e are filing together ate the form. | in a joint case, bo | th are equal | lly responsible for su | pplying correct ir | nformation. Both debtors must |
| | accurate as possibl | | needed, at | tach a separate sheet | t to this form. On | the top of any additional pages, |
| Down 4: Liet Your | One ditens 18/15 a 1 levre | . Coorned Claims | | | | |
| Part 1: List Your | Creditors Who Have | Secured Claims | | | | |
| 1. For any creditors information below | • | rt 1 of Schedule D | : Creditors \ | Who Have Claims Sec | cured by Property | y (Official Form 106D), fill in the |
| | or and the property th | at is collateral | | you intend to do with | the property that | |
| | | | secures a | i debt? | | as exempt on Schedule C? |
| O 111 1 = | | | _ | | | _ |
| Creditor's Toyo name: | ota Motor Credit C | 0 | | der the property. the property and rede | om it | □ No |
| | | | | the property and rede | | ■ Yes |
| · | 013 Toyota Rav 4 | 24000 miles | _ Reaffi | rmation Agreement. | | |
| property securing debt: | | | ☐ Retain | the property and [explanation of the property and propert | ain]: | |
| occurring door. | | | | | | _ |
| | Unexpired Personal | | ! O-1 | 0.5 | | - 11 (Official Farm 4000) (III |
| in the information be | elow. Do not list rea | l estate leases. Un | expired leas | e G: Executory Contra ses are leases that are does not assume it. 1 | e still in effect; th | ed Leases (Official Form 106G), fill ne lease period has not yet ended. (2). |
| Describe your unex | pired personal prop | erty leases | | | | Will the lease be assumed? |
| • | _ | • | | | | _ |
| Lessor's name: | Lease | | | | | □ No |
| | | | | | | Yes |
| | | | | | | |
| Description of leased Property: | month to mont | h lease | | | | |
| | | | | | | |
| Dowt 2: Clare Bullet | | | | | | |
| Part 3: Sign Below | W | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 39 of 48

| Det | Ricardo Camargo | Case number (if known) |
|-----|---|--|
| | ler penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease. | y intention about any property of my estate that secures a debt and any personal |
| X | /s/ Ricardo Camargo | X |
| | Ricardo Camargo | Signature of Debtor 2 |
| | Signature of Debtor 1 | |
| | Date July 8, 2016 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 44 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Ricardo Camargo | | Case No. | | | |
|--|---|---|-------------------------------|-------------------------------------|--|--|
| | | Debtor(s) | Chapter | 7 | | |
| | DISCLOSURE OF COMPI | ENSATION OF ATTOR | NEY FOR DE | EBTOR(S) | | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | to me, for services rendered or to | | |
| | For legal services, I have agreed to accept | | \$ | 1,500.00 | | |
| | Prior to the filing of this statement I have received | | | 1,500.00 | | |
| | Balance Due | | \$ | 0.00 | | |
| 2. | \$_335.00 of the filing fee has been paid. | | | | | |
| 3. | The source of the compensation paid to me was: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 4. | The source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| | | | | | | |
| 5. | ■ I have not agreed to share the above-disclosed com | npensation with any other person u | nless they are mem | bers and associates of my law firm. | | |
| | ☐ I have agreed to share the above-disclosed compent copy of the agreement, together with a list of the n | | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects | of the bankruptcy of | ease, including: | | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;d. [Other provisions as needed] | | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed f | ee does not include the following s | ervice: | | | |
| | | CERTIFICATION | | | | |
| | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | | |
| J | July 8, 2016 | /s/ Robert J Hamilt | on | | | |
| I | Date | Robert J Hamilton | 6299951 | | | |
| | | Signature of Attorney Hamilton & Antons | sen. Ltd. | | | |
| | | 3290 Executive Dri | | | | |
| | | Joliet, IL 60431 (815)729-9220 Fax | v: (815\467 ₋ 8417 | | | |
| | | rob@halawoffices. | | | | |
| | | Name of law firm | | | | |

Case 16-22077 Doc 1 Filed 07/08/16 Entered 07/08/16 16:16:50 Desc Main Document Page 45 of 48

CHAPTER 7 BANKRUPTCY ATTORNEY-CLIENT AGREEMENT

| "Attorney" and Colon Col |
|--|
| "Attorney" and then the Said Client under the following agreement: "Attorneys will represent the said Client under the following agreement: |
| 1. That Client agrees pay a flat fee in the amount of \$ 1000 plus filing fee (currently \$355.00) to secure the Attorney's availability for the filing of a Chapter 7 Bankruptcy and assistance with prosecuting that matter through termination of the bankruptcy case. This is a "classic" retainer is earned when paid and immediately becomes the property of the lawyer. Said sums will not be deposited into any trust account. |
| 2. That the retainer will be paid to Attorneys as follows: a. Client will make an initial payment of \$ 885 prior to Filing (includes \$355.00 for filing fee) b |
| |
| С |
| |
| |
| 3. If some unforeseen event shall develop which prevents us from continuing, to represent client, we will return such portion of the fee paid that exceeds the services rendered by us. The fee for our services shall be based on \$225 per hour for office time and \$225.00 per hour for time spent outside the office. 4. Client agrees to pay all court costs and any other expenses necessary to defend or prosecute this action on behalf of the Client, (including stenographer, investigator and expert fees). |
| 5. Client understands that this retainer Contract DOES NOT include any additional legal services which are not directly related to this action (including but not limited to adversary proceedings in bankruptcy), and further understands that this Contract may be terminated by Client at any time, and that all materials and documents will be returned to Client upon full payment of the then outstanding fees and costs, if any. |
| 6. It is further understood that we made no promises to you as to the outcome of this case except that we promise to render our best professional skills. |
| 7. Every effort will be made to expedite the Client's case promptly and efficiently, according to the highest legal professional and ethical standards. However the expedition of Client's case is subject to Client's wishes, best interests, and cooperation. |
| 8. Client hereby acknowledges that he/she has read and understands this Contract and has received a copy of the same. |
| AGREED AND APPROVED: |
| |
| CLIENT DATE PATE |
| DATE Alandyler Attorney |
| ATTORNEY DATE |
| -AINDY DATE |

United States Bankruptcy Court Northern District of Illinois

| In re | Ricardo Camargo | | Case No. | |
|-------|--|---|---------------------------------|--------------|
| | | Debtor(s) | Chapter 7 | |
| | VE | CRIFICATION OF CREDITOR M | ATRIX | |
| | | Number of | Creditors: | 17 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit | fors is true and correct to the | e best of my |
| Date: | July 8, 2016 | /s/ Ricardo Camargo Ricardo Camargo Signature of Debtor | | |

Afni 1310 Martin Luther King Dr Bloomington, IL 61701

Calvary Portfolio Services 500 Summit Lake Dr Ste 400 Valhalla, NY 10595

Kevin W. Mortell 1821 Walden Office Square Suite 400 Schaumburg, IL 60173

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Lease 454 Franklin Street Joliet, IL 60435

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Portfolio Recovery Po Box 41067 Norfolk, VA 23541

Reader Link Distribution c/o Steven Carlos 1420 Kensington Road Oak Brook, IL 60523 Sears PO Box 183082 Columbus, OH 43218

Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

Toyota Motor Credit Co Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350

Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350